

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L06551 (0)

1. Corporation Name

SEAGLADES WEST, INC.



Principal Place of Business

Mailing Address

~~LAWRENCE GAMER~~  
308 Lucerne  
LAKE WORTH FL 33460

308 LUCERNE AVE  
~~LAKE WORTH FL 33460~~  
LAKE WORTH FL 33460  
US

3. Date Incorporated or Qualified  
08/02/1989

3a. Date of Last Report  
04/07/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 308 Lucerne Ave  
Suite, Apt. #, etc

4. FEI Number  
65-0140876

Applied For  
Not Applicable

22 City & State

27 City & State  
28 Lake Worth FL 33460

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

23 Zip Country

29 Zip Country  
30 Palm Beach

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GAMER, LAWRENCE  
~~LAKE WORTH FL 33460~~  
LAKE WORTH FL 33460

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME D  
GAMER, LAWRENCE  
STREET ADDRESS  
LAKE WORTH FL 308 Lucerne Ave  
CITY - ST - ZIP LAKE WORTH FL

TITLE ☐ DELETE  
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CITY - ST - ZIP

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12 NAME  
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14 CITY - ST - ZIP

21 TITLE  
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31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lawrence Gamer  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0158054 PP

CR2E034 (3/96)